DECLARATION AND POWER OF ATTORNEY U.S.A.

ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

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101	As a below named inventor, I declare that my residence, post office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled: Protease													
102			[V]··		DCT/ED	00.70	0200	 		7		10	0000	
		ed and claimed in:		PCT International Application No. PCT/EP 00/00390						Janua	ary	<u> 19,</u>	2000	
	the attached	specification		the specification in application Serial No.					filed					
	I hereby state tha	at I have reviewed and unders		cable) and amended	-	uding the c	daime as amanda	ud by noy omond	most co	formed to a	h			
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Prior Foreign Application(s)													
	199	02 550.9	Ε	January 22, 19 (Day/Month/Year Filed)			. 1999	ı	X					
	(Number)	,			ountry)					Yes	No			
_		25 946.1		DE			<u>June 8, 1999</u>			X				
3	(Number)	00.445.0		(Country)			(Day/Month/Year Filed)			Yes No				
103	(Number)	29 115.2	<u> </u>	June 24, 199 (Day/Month/Year Filed)			999	Į	X					
Н	. ,	, (223.1.7,								res	No			
104		I hereby claim the benefit under Title 35, United States Code,§119(e) of any United States provisional application(s) listed below:												
닏	Application No.			Application No.					Filing Date			· · · · · · · · · · · · · · · · · · ·		
105	I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of the application:												ic motorial to	
_	(Ap	plication Serial No.)		-	(Filing Date)			(Status: pate	nted, pe	ending, aba	andoned)		
age R. S	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No.) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769); MARVIN R. STERN (20,640); ALLEN S. MELSER (27,215); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); YOON S. HAM (45,307) and NATHANIEL A. HUMPHRIES-(22,772)													
Γ	SEND CO	RRESPONDENCE TO:		(O. 00136	ノ		DIRECT TELE	PHONE CAL	LS TO	:				
-lov	OF JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N.W. WASHINGTON, D.C. 20004 *Inventor(s) name must include at least one unabbreviated first or middle name.													
		LL NAME * FAMILY NAME			GIVEN NAME			MID			DDLE NAME			
	OF INVENTOR				Kav			I I	IIDDLE NAIVIE					
12	RESIDENCE & CITIZENSHIP							cou	OUNTRY OF CITIZENSHIP					
		POST-OFFICE ADDRES	35		CITY	<u> </u>	STATE		Germany OR COUNTRY Z			P COD	E	
	ADDRESS	Ehrenfeldgü:	rtel 139				I					5082		
H	FULL NAME *	FAMILY NAME		GIVEN NAME			MIC			IIDDLE NAME				
202	OF INVENTOR RESIDENCE & COTZENSHIP	СПУ			STATE OR FOREIGN COUNTRY			cou	COUNTRY OF CITIZENSHIP					
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203	FULL NAME * OF INVENTOR	FAMILY NAME			GIVEN NAME			MIDE	MIDDLE NAME					
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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 201* SIGNATURE OF INVENTOR 202* SIGNATURE OF INVENTOR 203*														
DΑ	DATE 19.09. 2001 DATE DATE													